



Rhode Island Department of Health
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www.health.ri.gov

Date: November 18, 2009
To: Rhode Island Obstetric Providers
From: Director of Health, David R. Gifford, MD, MPH
Re: H1N1 Vaccination of Post-Partum Mothers

The Rhode Island Department of Health is expanding who can receive the H1N1 vaccine in your offices from pregnant women to include all post-partum women up to SIX months post-partum. Therefore, we are asking that you use the remaining H1N1 vaccine in your offices for:

- Post-partum woman up to SIX months post-partum;
- Any remaining pregnant women who have not yet received the vaccine; or
- Newly pregnant women.

Today, we will be announcing that post-partum mothers up to SIX months post-partum should contact their obstetric providers to receive the H1N1 vaccine. As you know, the Centers for Disease Control and Prevention (CDC) has made parents and caregivers of children under six months of age a Tier I priority group for H1N1 vaccination, since children under six months of age are too young to safely receive the vaccine.

We understand that you do not traditionally see post-partum women past 4-6 weeks on average, but we are asking you to administer H1N1 vaccine to any of your post-partum patients who delivered in the past six months (i.e. after June 15th, 2009). We will let you determine the most efficient method of administering the vaccine to your post-partum patients. Many practices may find it most efficient to designate set times or days (e.g. series of mini vaccine clinics) where you can schedule a group of post-partum women to be vaccinated by your office personnel. They do not need to see you for a physician visit. Your office will be able to bill the patient's insurance for the administration fee (you can bill for an office visit only if there is a reason beyond vaccination for the visit).

A review of the amount of vaccine each of you has administered so far suggests an adequate supply of vaccine in your offices to absorb these additional post-partum women. However, if you should need additional vaccine, you can still get some from your assigned birthing hospital.

We would also like to remind you to submit your reports of how many patients have received the H1N1 vaccine on a weekly basis to the Department of Health electronically. (Note: this is a Federal requirement.) If you have any questions concerning this process, please call Barbara McNeilly at 222-4640. We monitor these reports closely and make decisions about vaccine allocation, redistribution between practices and changes in priority groups based on the uptake of vaccine in each of your practices. We also will likely begin (starting in December) to report by physician practice the uptake and availability of H1N1 vaccine for your pregnant and post-partum women.

Thank you again for your continued help in vaccinating pregnant and post-partum women.